

**United States Bankruptcy Court**  
**Southern District of Ohio**

In re **Kenneth E. Riley**,  
Debtor

Case No. **2:15-bk-55183**

Chapter **13**

**SUMMARY OF SCHEDULES - AMENDED**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	<b>Yes</b>	<b>1</b>	<b>114,000.00</b>		
B - Personal Property	<b>Yes</b>	<b>4</b>	<b>33,122.00</b>		
C - Property Claimed as Exempt	<b>Yes</b>	<b>1</b>			
D - Creditors Holding Secured Claims	<b>Yes</b>	<b>1</b>		<b>61,839.88</b>	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	<b>Yes</b>	<b>3</b>		<b>15,649.38</b>	
F - Creditors Holding Unsecured Nonpriority Claims	<b>Yes</b>	<b>2</b>		<b>58,638.00</b>	
G - Executory Contracts and Unexpired Leases	<b>Yes</b>	<b>1</b>			
H - Codebtors	<b>Yes</b>	<b>1</b>			
I - Current Income of Individual Debtor(s)	<b>Yes</b>	<b>2</b>			<b>3,805.41</b>
J - Current Expenditures of Individual Debtor(s)	<b>Yes</b>	<b>2</b>			<b>2,140.35</b>
Total Number of Sheets of ALL Schedules		<b>18</b>			
Total Assets			<b>147,122.00</b>		
Total Liabilities				<b>136,127.26</b>	

**United States Bankruptcy Court**  
**Southern District of Ohio**

In re **Kenneth E. Riley**,  
Debtor

Case No. **2:15-bk-55183**

Chapter **13**

**STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)**

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

**This information is for statistical purposes only under 28 U.S.C. § 159.**

**Summarize the following types of liabilities, as reported in the Schedules, and total them.**

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	<b>0.00</b>
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	<b>15,649.38</b>
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	<b>0.00</b>
Student Loan Obligations (from Schedule F)	<b>0.00</b>
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	<b>0.00</b>
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	<b>0.00</b>
TOTAL	<b>15,649.38</b>

**State the following:**

Average Income (from Schedule I, Line 12)	<b>3,805.41</b>
Average Expenses (from Schedule J, Line 22)	<b>2,140.35</b>
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14 )	<b>12,104.65</b>

**State the following:**

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		<b>0.00</b>
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	<b>15,649.38</b>	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		<b>0.00</b>
4. Total from Schedule F		<b>58,638.00</b>
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		<b>58,638.00</b>

B6F (Official Form 6F) (12/07)

In re **Kenneth E. Riley**Case No. **2:15-bk-55183**

Debtor

## AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. xxxxxxxx9988  Bank of America PO Box 982238 El Paso, TX 79998		-				17,262.00
Account No. xxxxxxxx2939  Cardmember Service/Chase P.O. Box 15298 Wilmington, DE 19850-5298		-				24,230.00
Account No. xxxxxxxx4899  Citi Bank/Sears P.O. Box 6189 Sioux Falls, SD 57117		-				1,785.00
Account No. xxxxxxxx7600  Fifth Third Bank P.O. Box 630412 Cincinnati, OH 45263	X	-			X	269.00
Subtotal (Total of this page)						43,546.00

1 continuation sheets attached

B6F (Official Form 6F) (12/07) - Cont.

In re **Kenneth E. Riley**

Case No. **2:15-bk-55183**

Debtor

**AMENDED**  
**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
 (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>xxxxxxxx1166</b>		<b>Account Balance</b>				
<b>Synchrony Bank/JCPennys</b> <b>PO Box 965007</b> <b>Orlando, FL 32896</b>	-					<b>2,929.00</b>
Account No. <b>xxxxxxxx0102</b>		<b>Account Balance</b>				
<b>Synchrony Bank/PLCC</b> <b>PO Box 96524</b> <b>Orlando, FL 32896</b>	-					<b>37.00</b>
Account No. <b>xxxxxxxx0671</b>		<b>Account Balance Written Off</b>				
<b>Universal Card/Citibank</b> <b>P.O. Box 6241</b> <b>Sioux Falls, SD 57117</b>	-					<b>5,976.00</b>
Account No.		<b>Personal Loan</b>				
<b>William and Renee Flesher</b> <b>3000 County Road 8</b> <b>Dillonvale, OH 43917</b>	-					<b>6,150.00</b>
Account No.						
Sheet no. <u>1</u> of <u>1</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>Subtotal</b> (Total of this page) <b>15,092.00</b>
(Report on Summary of Schedules)						<b>Total</b> <b>58,638.00</b>

In re **Kenneth E. Riley**

Case No. **2:15-bk-55183**

Debtor

## SCHEDULE H - CODEBTORS - AMENDED

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
<b>Elaine S. Riley</b> <b>10545 State Route 29</b> <b>Mechanicsburg, OH 43044</b>	<b>Fifth Third Bank</b> <b>P.O. Box 630412</b> <b>Cincinnati, OH 45263</b>

Fill in this information to identify your case:

Debtor 1 Kenneth E. Riley

Debtor 2  
(Spouse, if filing) \_\_\_\_\_

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF OHIO

Case number 2:15-bk-55183  
(If known)

Check if this is:

- ☒ An amended filing
- ☐ A supplement showing post-petition chapter 13 income as of the following date:

MM / DD / YYYY

## Official Form B 6I

### Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Employment

		Debtor 1	Debtor 2 or non-filing spouse
<b>1. Fill in your employment information.</b>  If you have more than one job, attach a separate page with information about additional employers.  Include part-time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.	<b>Employment status</b>	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed	<input type="checkbox"/> Employed <input type="checkbox"/> Not employed
	<b>Occupation</b>	Owner	
	<b>Employer's name</b>	Riley Heating & Building Supply	
	<b>Employer's address</b>	4000 St. Rt. 152 Dillonvale, OH 43917	
	<b>How long employed there?</b>	55 years	

#### Part 2: Give Details About Monthly Income

**Estimate monthly income as of the date you file this form.** If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. <b>List monthly gross wages, salary, and commissions</b> (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$ 0.00	\$ N/A
3. <b>Estimate and list monthly overtime pay.</b>	3. +\$ 0.00	+\$ N/A
4. <b>Calculate gross income.</b> Add line 2 + line 3.	4. \$ 0.00	\$ N/A

Debtor 1 **Kenneth E. Riley**

Case number (if known) **2:15-bk-55183**

		For Debtor 1	For Debtor 2 or non-filing spouse
<b>Copy line 4 here</b> .....	4.	\$ <b>0.00</b>	\$ <b>N/A</b>
<b>5. List all payroll deductions:</b>			
5a. <b>Tax, Medicare, and Social Security deductions</b>	5a.	\$ <b>0.00</b>	\$ <b>N/A</b>
5b. <b>Mandatory contributions for retirement plans</b>	5b.	\$ <b>0.00</b>	\$ <b>N/A</b>
5c. <b>Voluntary contributions for retirement plans</b>	5c.	\$ <b>0.00</b>	\$ <b>N/A</b>
5d. <b>Required repayments of retirement fund loans</b>	5d.	\$ <b>0.00</b>	\$ <b>N/A</b>
5e. <b>Insurance</b>	5e.	\$ <b>0.00</b>	\$ <b>N/A</b>
5f. <b>Domestic support obligations</b>	5f.	\$ <b>0.00</b>	\$ <b>N/A</b>
5g. <b>Union dues</b>	5g.	\$ <b>0.00</b>	\$ <b>N/A</b>
5h. <b>Other deductions.</b> Specify: .....	5h.+	\$ <b>0.00</b>	\$ <b>N/A</b>
<b>6. Add the payroll deductions.</b> Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$ <b>0.00</b>	\$ <b>N/A</b>
<b>7. Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.	7.	\$ <b>0.00</b>	\$ <b>N/A</b>
<b>8. List all other income regularly received:</b>			
8a. <b>Net income from rental property and from operating a business, profession, or farm</b> Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$ <b>2,015.41</b>	\$ <b>N/A</b>
8b. <b>Interest and dividends</b>	8b.	\$ <b>0.00</b>	\$ <b>N/A</b>
8c. <b>Family support payments that you, a non-filing spouse, or a dependent regularly receive</b> Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$ <b>0.00</b>	\$ <b>N/A</b>
8d. <b>Unemployment compensation</b>	8d.	\$ <b>0.00</b>	\$ <b>N/A</b>
8e. <b>Social Security</b>	8e.	\$ <b>1,790.00</b>	\$ <b>N/A</b>
8f. <b>Other government assistance that you regularly receive</b> Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: .....	8f.	\$ <b>0.00</b>	\$ <b>N/A</b>
8g. <b>Pension or retirement income</b>	8g.	\$ <b>0.00</b>	\$ <b>N/A</b>
8h. <b>Other monthly income.</b> Specify: .....	8h.+	\$ <b>0.00</b>	\$ <b>N/A</b>
<b>9. Add all other income.</b> Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$ <b>3,805.41</b>	\$ <b>N/A</b>
<b>10. Calculate monthly income.</b> Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$ <b>3,805.41</b>	\$ <b>N/A</b>
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b> Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> . Specify: .....	11.	+\$ <b>0.00</b>	
<b>12. Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income. Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain Liabilities</i> and <i>Related Data</i> , if it applies	12.	\$ <b>3,805.41</b>	
<b>Combined monthly income</b>			
<b>13. Do you expect an increase or decrease within the year after you file this form?</b>			
<input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain: .....			

Fill in this information to identify your case:

Debtor 1 **Kenneth E. Riley**

Debtor 2 \_\_\_\_\_  
(Spouse, if filing)

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF OHIO

Case number **2:15-bk-55183**  
(If known)

Check if this is:

- ☒ An amended filing
- ☐ A supplement showing post-petition chapter 13 expenses as of the following date: \_\_\_\_\_  
MM / DD / YYYY
- ☐ A separate filing for Debtor 2 because Debtor 2 maintains a separate household

## Official Form B 6J

### Schedule J: Your Expenses

12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Your Household

1. Is this a joint case?

- ☒ No. Go to line 2.
- ☐ Yes. Does Debtor 2 live in a separate household?
- ☐ No
- ☐ Yes. Debtor 2 must file a separate Schedule J.

2. Do you have dependents? ☐ No

Do not list Debtor 1 and Debtor 2.

☒ Yes. Fill out this information for each dependent.....

Do not state the dependents' names.

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Girlfriend

- ☐ No
- ☒ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents? ☐ No ☐ Yes

#### Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 6I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 0.00

If not included in line 4:

- 4a. Real estate taxes
- 4b. Property, homeowner's, or renter's insurance
- 4c. Home maintenance, repair, and upkeep expenses
- 4d. Homeowner's association or condominium dues
5. Additional mortgage payments for your residence, such as home equity loans

4a. \$ 93.12

4b. \$ 95.50

4c. \$ 200.00

4d. \$ 0.00

5. \$ 0.00



Debtor 1 **Kenneth E. Riley**

Case number (if known) **2:15-bk-55183**

<b>6. Utilities:</b>		
6a. Electricity, heat, natural gas	6a. \$	<b>566.00</b>
6b. Water, sewer, garbage collection	6b. \$	<b>21.00</b>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	<b>0.00</b>
6d. Other. Specify: <u>Hot Water</u>	6d. \$	<b>18.18</b>
<u>Phone/Internet/Cable</u>	\$	<b>257.00</b>
<b>7. Food and housekeeping supplies</b>	7. \$	<b>530.00</b>
<b>8. Childcare and children's education costs</b>	8. \$	<b>0.00</b>
<b>9. Clothing, laundry, and dry cleaning</b>	9. \$	<b>66.00</b>
<b>10. Personal care products and services</b>	10. \$	<b>60.00</b>
<b>11. Medical and dental expenses</b>	11. \$	<b>120.00</b>
<b>12. Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$	<b>0.00</b>
<b>13. Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13. \$	<b>0.00</b>
<b>14. Charitable contributions and religious donations</b>	14. \$	<b>0.00</b>
<b>15. Insurance.</b>		
Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$	<b>13.55</b>
15b. Health insurance	15b. \$	<b>0.00</b>
15c. Vehicle insurance	15c. \$	<b>0.00</b>
15d. Other insurance. Specify: _____	15d. \$	<b>0.00</b>
<b>16. Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____		
16. \$		<b>0.00</b>
<b>17. Installment or lease payments:</b>		
17a. Car payments for Vehicle 1	17a. \$	<b>0.00</b>
17b. Car payments for Vehicle 2	17b. \$	<b>0.00</b>
17c. Other. Specify: _____	17c. \$	<b>0.00</b>
17d. Other. Specify: _____	17d. \$	<b>0.00</b>
<b>18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).</b>		
18. \$		<b>0.00</b>
<b>19. Other payments you make to support others who do not live with you.</b>		
\$		<b>0.00</b>
Specify: _____		
<b>20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>		
20a. Mortgages on other property	20a. \$	<b>0.00</b>
20b. Real estate taxes	20b. \$	<b>0.00</b>
20c. Property, homeowner's, or renter's insurance	20c. \$	<b>0.00</b>
20d. Maintenance, repair, and upkeep expenses	20d. \$	<b>0.00</b>
20e. Homeowner's association or condominium dues	20e. \$	<b>0.00</b>
<b>21. Other:</b> Specify: <u>Pet Food and Care</u>		
21. +\$		<b>100.00</b>
<b>22. Your monthly expenses.</b> Add lines 4 through 21. The result is your monthly expenses.		22. \$ <b>2,140.35</b>
<b>23. Calculate your monthly net income.</b>		
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	<b>3,805.41</b>
23b. Copy your monthly expenses from line 22 above.	23b. -\$	<b>2,140.35</b>
23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .		23c. \$ <b>1,665.06</b>
<b>24. Do you expect an increase or decrease in your expenses within the year after you file this form?</b> For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes.		
Explain: _____		

B6 Declaration (Official Form 6 - Declaration). (12/07)

**United States Bankruptcy Court  
Southern District of Ohio**In re **Kenneth E. Riley**

Debtor(s)

Case No. **2:15-bk-55183**Chapter **13****DECLARATION CONCERNING DEBTOR'S SCHEDULES - AMENDED**

## DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of **20** sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date **October 19, 2015**Signature **/s/ Kenneth E. Riley****Kenneth E. Riley**

Debtor

*Penalty for making a false statement or concealing property:* Fine of up to \$500,000 or imprisonment for up to 5 years or both.  
18 U.S.C. §§ 152 and 3571.